

# Ingram, Linda Child Minding

Aberdeen

**Type of inspection:**  
Unannounced

**Completed on:**  
15 May 2024

**Service provided by:**  
Linda Ingram

**Service provider number:**  
SP2003900520

**Service no:**  
CS2003001898

## About the service

Linda Ingram operates a service from their home in Portlethen. They are registered to provide a childminding service to care for a maximum of six children at any one time under the age of 16, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers are inclusive of children of the childminder's family.

Children have access to a living room, kitchen and downstairs bathroom. The service is located close to local amenities including schools and shops.

## About the inspection

This was an unannounced inspection which took place on 15 May 2024 between 11:30 and 15:15. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- gathered feedback about the service from families
- spoke with the childminder
- observed practice and children's experiences
- reviewed documents.

## Key messages

- Children were cared for by a childminder who knew them and their families well.
- Children experienced warm and caring interactions from the children.
- The childminder should review mealtimes to ensure snacks are nutritious and children are having an unhurried, social experience.
- The childminder should ensure children are experiencing high quality play and learning opportunities indoors, in the garden and in the wider community.
- The childminder should look at ways to improve their service through self-reflection using recognised documents.
- The childminder should access training to support their practice and good outcomes for children.

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	3 - Adequate
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

## How good is our care, play and learning?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality Indicator 1.1: Nurturing care and support

Children benefitted from warm, relaxed interactions helping them to feel loved, safe and secure. The childminder knew children well and had developed trusted and loving relationships. This supported them to be settled and confident in the setting. Parents told us, "Linda has taken care of my child for about a year now. I have always felt that she is a very welcoming person and that I can truly rely on her. She has a very special place in our hearts" and "She is passionate about what she is doing, keeps me updated with my child's development. She finds ways to keep them entertained and develop new skills. She is caring but firm when needed, adapts to the children's needs."

Personal plans were in place for all children and detailed information such as, emergency contacts, children's likes, dislikes and medical needs. These had been reviewed recently with parents. However, personal plans did not always reflect the current needs of children, for example, toileting and information on how medical needs would be met. Personal plans should be updated to ensure they reflect the current needs of children and strategies to support. We signposted the childminder to, 'A guide for Providers on Personal Planning: Early Learning and Childcare'.

Mealtimes were an unhurried and social experience. Food options available were limited and did not offer children a balanced, healthy meal. We discussed the importance of ensuring that children have opportunities to experience a variety of food options that are healthy and support a balanced diet. Children sat in the living room for whilst eating and we suggested the table could be used to ensure children are comfortable and safe whilst eating. We signposted the childminder to, 'Keeping children safe: supporting positive mealtime experiences in early learning and childcare (ELC)' and 'Food Matters' on the Care Inspectorate Hub. **(See area for improvement 1.)**

At the time of inspection, no children required medication. There were procedures in place for obtaining parental consent and the safe storage of medication. Nappy changing routines were sensitively carried out. Children were encouraged to be as independent as possible, for example, removing trousers. The childminder used kind, caring and gentle interactions when providing personal care, ensuring children felt safe and were well supported.

Children's sleep routines were mainly reflective of their family wishes. To support children to be safe, we advised the childminder to review sleeping arrangements where possible. For example, sleeping in a buggy can restrict movement and not allow the child to lie completely flat. This would support children to be safe and healthy.

### Quality Indicator 1.3: Play and Learning

Children benefitted from some toys that captured their interests, for example, some children were seen to be interested in toy cars that were out. A parent commented, "One example is my child loves cars, and they made a "car park" together so they could play more cars. They always have access to books and toys as they want." Resources available were age appropriate and children were seen to be using these. Children benefitted from some opportunities to develop literacy, language and numeracy skills. Books were available

and children were seen to be using these. Puzzles and games supported the development of numeracy. However, there were limited resources available for children to access, resulting in periods where children were not engaged in play. We suggested the childminder considers the range of resources available to ensure there are opportunities for a range of play experiences. We signposted the childminder to 'The loose parts toolkit' on the Care Inspectorate Hub. We have repeated the area for improvement made at the last inspection. The childminder agreed to action this.

The childminder was in the early stages of developing a system for recording children's learning and progression. They were recording some observations of children's play and learning. We suggested next steps could be taken from these observations and used to plan high quality and relevant learning experiences, further supporting children's learning and development. Further training in child development may support the childminder's confidence planning next steps for development (see quality indicator 4.1).

Children benefitted from regular groups. These outings not only provided opportunities for social interaction and physical activity but also fostered children's confidence, independence, and sense of belonging within the community.

### Areas for improvement

1. To ensure children's safety and wellbeing mealtimes should be better managed to offer more positive experiences for children. This should include, but is not limited to:

- a) offering more nutritious food choices
- b) sitting at the table to ensure children are well supervised and enjoying a relaxed and social mealtime.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning' (HSCS 1.33); and 'I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible' (HSCS 1.35).

### How good is our setting?

4 - Good

We evaluated this quality indicator as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

#### Quality Indicator 2.2: Children experience high quality facilities

Children were cared for in an environment that was homely and welcoming. Areas used for childminding provided ample space for children to play and opportunities to relax. Large, comfortable sofas allowed spaces for children to rest and relax. A parent commented, "Linda provides safe and nurturing environment for our child."

Children benefitted from mostly age-appropriate resources. However, we suggested the childminder consider adding resources and experiences to supporting children's engagement levels, for example, opportunities to mark make and be creative. This would help ensure children were stimulated and engaged.

Children benefitted from a well-considered, safe environment. The childminder had a good knowledge and

understanding of potential risks. A daily checklist supported them to ensure the home was safe at the beginning of the day. Written risk assessments were in place; however, these had not been recently reviewed. The childminder agreed to action this.

Infection control measures were in place, such as handwashing by the children and childminder to minimise the spread of infection. We advised the childminder to wash hands before nappy changing to prevent the spread of infection. The childminder had appropriate PPE (personal protective equipment) and a changing mat for nappy changes. This supported children to be protected from infection and be healthy.

## How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality indicator 3.1: Quality assurance and improvement are led well

The childminder's aims and objectives detailed the service provided and supported children to be safe, valued and cared for in a friendly, welcoming environment, and we observed that the childminder was mainly successful in achieving this goal. This was echoed by parents who told us, "I don't feel a need to develop the service, but I'm confident if it was to be discussed it would be done meaningfully" and "I get daily personalised updates from my childminder, she has my child in a safe and healthy environment, I see my childminder continuing and helping me in the learning and development process of my child." However, we found there was room for improvement in how the childminder operated their service. Engaging in more reflective practices, such as regularly reviewing the Care Inspectorate updates and accessing the HUB, would enable the childminder to stay informed about current best practices and regulatory requirement. Adopting this approach to ongoing learning and reflection into their practice would ensure the care provided meets with current standards and promotes the holistic development of each child.

Positive relationships had been established with parents which allowed for open communication and effective information sharing. The childminder engaged well with parents through daily discussions. They shared they had sought formal feedback from parents, but this had not resulted in meaningful change. There was scope to build further opportunities for children and parents to give their views to support improvements. The childminder should now consider ways they could gather parents' views to support them in assessing the service and make improvements to meet children's and family's needs.

There were no systems in place to evaluate the quality of the service, support the childminder to identify potential areas for improvement. The childminder reflected informally on some aspects of practice and service delivery. They talked through upcoming ideas for improvement in the daily routine. We suggested developments/changes could be recorded to support the childminder to reflect and evaluate the impact of improvements. Developing a quality assurance system would enable planning for continuous improvement and support positive outcomes for children. We signposted the childminder to 'Quality framework for daycare of children, childminding and school-aged childcare' available on the Care Inspectorate Hub. This was a previous area for improvement at the last inspection (**see 'What the service has done to meet any areas for improvement we made at or since the last inspection'**).

Policies and procedures were in place which underpinned the service. These were updated annually. However, some of these required updating to reflect current legislation and best practice guidance. Regular reviews and updates of policy and procedure would help ensure children access a quality service and experience care that is right for them.

**How good is our staff team?****4 - Good**

We evaluated this quality indicator as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

**Quality Indicator 4.1: Staff skills, knowledge and values**

Children benefitted from kind and nurturing interactions, allowing them to feel loved and supported by the childminder. The childminder had been providing a service for some time and had developed good relationships with families. One parent commented, "My son is happy and confident, he has a fabulous relationship with Linda which they've had from day one." Another parent told us, "Linda is very considerate, accommodating and caring childminder."

The childminder had basic training in place, including paediatric first aid, child protection, food hygiene and infection, prevention and control. They should now take time to reflect on these, documenting their learning and the impact on the setting and outcomes for children. The childminder had accessed other training opportunities; however, these were not always relevant to the needs of the service at the time. They would benefit from engaging with best practice guidance and further training in child development and schemas to support improved experiences for children. This was a previous area for improvement at the last inspection (see 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Children were always well supervised, including mealtimes. The childminder communicated with children when they were leaving the room. This ensured they were aware of where the childminder was going, and supervision ensured children's safety.

**What the service has done to meet any areas for improvement we made at or since the last inspection****Areas for improvement****Previous area for improvement 1**

To support children to achieve their full potential the indoor and outdoor environment should be developed to create:

- Resources readily accessible to children to enable choice.
- More engaging and stimulating learning experiences including natural and open-ended resources.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open-ended and natural materials' (HSCS 1.31); and

'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

**This area for improvement was made on 13 January 2020.**

### Action taken since then

There are some resources available in the living room area. These were construction toys, cars and books. We suggested mark making materials and loose parts would further support children to problem solve, use their imaginations and practice skills.

**This area for improvement has not been met.**

### Previous area for improvement 2

The childminder should continue to improve the service by:

- a. developing her knowledge and skills through ongoing training and by reading and implementing relevant best practice guidance.
- b. Identify how new learning has been put into practice and review the impact on children's care and experiences.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and

'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

**This area for improvement was made on 13 January 2020.**

### Action taken since then

The childminder had accessed some training since the last inspection. A range of additional support training courses had been accessed through SCMA. We recognise this is important; however, training relevant to the childminder's needs such as child development and Schema training would support improved outcomes for children.

**This area for improvement has not been met.**

### Previous area for improvement 3

The childminder should systematically quality assure her service in consultation with parents/carers and children; using best practice documents including, 'Building the Ambition' and 'Your Childminding Journey' which are available on our website <https://hub.careinspectorate.com/>

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:



'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This area for improvement was made on 13 January 2020.**

#### Action taken since then

The childminder has been making some changes to the service provided as a result of reflections. However, there is scope to improve quality assurance and self-reflection practices by reflecting on key good practice guidance and incorporating these into daily practices. To support improvement, we have reworded this area for improvement to read:

To ensure children access a high-quality provision, the childminder should develop systems to quality assurance their service and make meaningful change. This should include, but is not limited to:

- a) involving children and families in a meaningful way to help develop the setting.
- b) ensuring quality assurance systems, including the use of quality audit tools such as 'A quality framework for daycare of children, childminding and school-aged childcare' are embedded into practice. Reflections from these should be used to plan relevant improvements.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This area for improvement has not been met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	3 - Adequate
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

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